

UNITED STATES BANKRUPTCY COURT

Southern District of New York

In re: **Silicon Graphics Federal, Inc.**

Case No.: **09-11702**

Debtor

SUBJECT TO GENERAL AND SPECIFIC NOTES TO THESE SCHEDULES

AMENDED SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, C, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under Chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES / NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - REAL PROPERTY	NO	0	\$0		
B - PERSONAL PROPERTY	NO	0	\$21,817,962		
C - PROPERTY CLAIMED AS EXEMPT	NO	0			
D - CREDITORS HOLDING SECURED CLAIMS	NO	0		\$162,439,270	
E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS	YES	2		\$196,544	
F - CREDITORS HOLDING UNSECURED NON-PRIORITY CLAIMS	YES	2		\$6,465,707	
G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES	NO	0			
H - CODEBTORS	NO	0			
I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)	NO	0			N/A
J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)	NO	0			N/A
Total number of sheets of all Schedules		4			
			Total Assets >	\$21,817,962	
			Total Liabilities >	\$169,101,521	

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AMENDED SCHEDULE E - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C U D	AMOUNT OF CLAIM
See Exhibit E-1 immediately following Schedule E		Tax Liabilities	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	Undetermined
See Exhibit E-2 following Schedule E-1		Employee Claims	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$196,544
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Total

\$196,544

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AMENDED SCHEDULE

Exhibit E-2

Employee Claims

<u>Name</u>	<u>Address</u>	<u>City, State & Zip</u>	<u>C</u>	<u>U</u>	<u>D</u>	<u>Claim Amount</u>
Brenner,Jim	28622 Munera	Mission Viejo, CA 92692 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Dubois,Stephen	116 Indian Spring Rd	Concord, MA 01742 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Fuchigami,Harry	7839 Rockburn Drive	Ellicott City, MD 21043 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Kerstens,Andre	112 W Cardiff Ct	Newark, DE 19711 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Larson,Bryan	19672 Crestknoll Drive	Yorba Linda, CA 92886 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Linares,Steven	6 Chateaux Circle	Scarsdale, NY 10583 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Mason Jr.,John	3774 E. Viewcrest Dr.	Salt Lake City, UT 84124 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Matta,Rich	651 Dahlia Drive	Monroeville, PA 151461251 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
May,Kase	10525 Milam Road	Black Forest, CO 80908 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,108
McMurchie, Maureen	2958 East Weaver Avenue	Littleton, CO 80121 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Merrill,Cynthia	P.O. Box 2794	Saratoga, CA 95070 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Palmer,Bradley	14 East Street	Hopkinton, MA 01748 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Pickett, Patricia	21200 Trumpet Dr #203	Newhall, CA 91321 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Roberts,Shelley	2937 S. Zeno Way	Aurora, CO 80013 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,997
Torres,Robert	100 Via Palestra	Palos Verdes Estates, CA 90274 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Umina,Sherry	8035 S Mountain Oaks Drive	Salt Lake City, UT 84121 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
VanDegrift,George	11052 Bridgepointe NE	Albuquerque, NM 87111 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$469
Wilson,Chan	3844 Coyt Road	Cottage Grove, WI 53527 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
Wood,Justin	407 Steep Mountain Drive	Draper, UT 84020 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$9,770
Zelsnack,William	7195 Horseshoe Road	Colorado Springs, CO 80923 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,950
						\$196,544

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AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedule D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	CODEBTOR	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C U D	AMOUNT OF CLAIM
See Exhibit F-1 immediately following Schedule F		Accounts Payable	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	\$1,117,161
See Exhibit F-2 immediately following Exhibit F-1		Intercompany Liabilities	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$5,111,197
See Exhibit F-3 immediately following Exhibit F-2		Unsecured Employee Liabilities	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$237,349
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Total				\$6,465,707

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AMENDED SCHEDULE

Exhibit F-4
Unsecured Employee Liabilities

<u>Name</u>	<u>Address</u>	<u>C</u>	<u>U</u>	<u>D</u>	<u>Claim Amount</u>
Brenner,Jim	28622 Munera Mission Viejo, CA 92692 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$25,439
Dubois,Stephen	116 Indian Spring Rd Concord, MA 01742 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,471
Fuchigami,Harry	7839 Rockburn Drive Ellicott City, MD 21043 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$20,969
Kerstens,Andre	112 W Cardiff Ct Newark, DE 19711 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,446
Larson,Bryan	19672 Crestknoll Drive Yorba Linda, CA 92886 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$15,667
Linares,Steven	6 Chateaux Circle Scarsdale, NY 10583 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$62,761
Mason Jr.,John	3774 E. Viewcrest Dr. Salt Lake City, UT 84124 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$9,444
Matta,Rich	651 Dahlia Drive Monroeville, PA 151461251 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$8,832
McMurchie, Maureen	2958 East Weaver Avenue Littleton, CO 80121 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$4,802
Merrill,Cynthia	P.O. Box 2794 Saratoga, CA 95070 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$19,263
Palmer,Bradley	14 East Street Hopkinton, MA 01748 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$6,235
Pickett, Patricia	21200 Trumpet Dr #203 Newhall, CA 91321 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$15,366
Torres,Robert	100 Via Palestra Palos Verdes Estates, CA 90274 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$14,979
Umina,Sherry	8035 S Mountain Oaks Drive Salt Lake City, UT 84121 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$9,388
Wilson,Chan	3844 Coyt Road Cottage Grove, WI 53527 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$7,457
Zelsnack,William	7195 Horseshoe Road Colorado Springs, CO 80923 US	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,829
					<hr/> \$237,349 <hr/>

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DECLARATION CONCERNING DEBTOR'S AMENDED SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the Secretary of the Corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing amended summary and schedules, consisting of 5 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Date: April 29, 2009

Signature: _____



Kent Randolph, Secretary

Penalty for making a false statement: Fine of up to \$500,000, or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 and 3571.